

Appl. No. 10/620,904
Amdt. dated Oct. 29, 2008
Reply to Office action of Apr. 29, 2008

Amendments to the Drawings:

The attached sheet of drawings includes changes to Figure 10. This sheet replaces the original sheets including Figure 10. The changes to the Figure are described in the previous amendments to the Specification.

Attachment: Replacement Sheet

REMARKS/ARGUMENTS

Claims 2-9, 12-16 and 21-28 remain in the application. Claims 1, 10-11 and 17-20 have been canceled without prejudice. Claims 2-9 and 12-28 were rejected in the Office Action mailed April 29, 2008 (hereinafter referred to as "Office Action"). Applicant respectfully submits a Request for Continued Examination and a three month extension of time to respond to the Office Action. A credit card authorization is being submitted electronically with the filing of this response. Accordingly, applicant respectfully submits that this response is timely filed on October 29, 2008. It is believed that no other fees are due at this time. In view of the following remarks and amendments, applicant respectfully request a timely Notice of Allowance be issued in this case.

Drawing Objections

The drawings were objected to for including reference character(s) not mentioned in the description and multiple reference characters used to designate the same element. Note that reference 108 in Figure 1 refers to PPO and Major Medical Premiums, whereas reference 254 in Figures 2B and 10 refers only to a Major Medical Premium. Similarly, reference 112 in Figure 1 refers to a PPO Fee and a Major Medical Payment, whereas reference 258 in Figures 2B and 10 refers only to a Major Medical Payment. Applicant respectfully submits that the foregoing amendments to the specification and drawings are fully responsive and overcome the objections. Reconsideration and removal of the objections are respectfully requested.

Double Patenting

Claims 1-7, 10-18, 21-23 and 26-28 were provisionally rejected on the ground of non-statutory obviousness-type double patenting over claims 1-22 of U.S. Patent Application No. 10/620,903. Applicant respectfully submits that appropriate action (amendment, cancellation or the filing of a terminal disclaimer) will be taken if the double patenting rejections remain after the allowance of any applicable claims.

Claim Ojections

Claim 25 was objected to. Applicant respectfully submits that claim 25 has been corrected. Reconsideration and removal of the rejection is respectfully requested.

Claim Rejections under 35 U.S.C. § 103(a)

Claims 1-10 and 24-26 were rejected under 35 U.S.C. § 103(a) as being unpatentable over Care Entrée (<http://web.archive.org/web/20011130030647/http://carentree.com>, 2001) in view of Lipton, et al. ("Pharmacy benefit management companies: Dimensions of performance", Annual Review of Public Health, Palo Alto 1999, Vol. 21, page 31), further in view of Goch ("A new Card Deal." Best's Review. Oldwick: Jul. 2002 (Vol. 103, Iss. 3, page 73).

In addition, claims 12-23 were rejected under 35 U.S.C. § 103(a) as being unpatentable over Care Entrée in view of Lipton and further in view of U.S. Patent No. 5,819,092 to Ferguson, et al. Claims 27 and 28 were also rejected under 35 U.S.C. § 103(a) as being unpatentable over Care Entrée in view of U.S. Patent No. 5,819,092 to Ferguson, et al. Applicant respectfully submits that claims 2-9, 12-16 and 21-28 are not obvious over the cited references and are, therefore, allowable under 35 U.S.C. § 103(a) for the reasons stated below.

Claims 26-28

Applicant respectfully submits that claims 26-28 are allowable under 35 U.S.C. § 103(a) because the cited references do not disclose, teach or suggest:

providing a medical service/good provider listing for the medical service/good providers based on the obtained information, wherein the medical service/good provider listing is accessible by the members via a global telecommunications network, comprises basic listings and premium listings for the medical service/good providers, and is searchable by the members using one or more search criteria comprising a geographic area or a service/good provided by the medical service/good providers; and

providing a discount price list to the members via the global telecommunications network, wherein the discount price list comprises published rates for the services/goods provided by the medical service/good providers for two or more geographic areas and each member can only access the published rates for the geographic area associated with the member, and the discount price list regulates the cost of services/goods provided to the members by the medical service/good provider such that the members pay the medical service/good providers in-full directly for any services/goods rendered to the members based on the discount price list,

as recited in claims 26-28. The Office Action stated “Care Entrée program fails to teach a method that regulates the cost of services/goods provided to the members by the medical service/good provider such that the members pay the medical service/good providers in-full directly for any services/goods rendered to the members based on the discount price list, and wherein the medical service/good provider listing comprises basic listings and premium listings for the medical service/good provider” (page 10, lines 17-21), and “Lipton fails to explicitly teach a method such that the members pay the medical service/good providers in-full directly for any services/goods rendered to the members based on the discount price list” (page 10, lines 26-27), but that Goch cures this deficiency (page 11, lines 1-3). Applicant respectfully disagrees that Goch cures this deficiency.

First, applicant respectfully submits that Lipton merely discusses traditional pharmacy benefit management companies as they existed in 1999 (Abstract). In addition, the discount lists in Lipton are not provided to the individuals or members to which the services/goods are provided. Instead, the discounts described in Lipton are provided between the PBM and the insurance company, pharmacies and/or the pharmaceutical companies (paragraph 7, lines 9-11). As a result, Lipton does not cure the deficiencies of Care Entrée.

Second, applicant respectfully submits that it would not have been obvious to one of ordinary skill in the art at the time the invention was made to provide members with a medical service/good provider listing containing basic and premium listings for the medical service/good providers because the insurance, HMO, PBM, and PPO industries teach against any sort of favoritism or competition among medical service/good providers offered directly to individuals within their networks. As a result, the modifications identified in the Office Action (pages 19, lines 8-17) based on Ferguson would “change the principle of operation of the prior art invention [Care Entrée and Lipton] being modified.” MPEP § 2143.01 (VI). As a result, “the teachings of the references are not sufficient to render the claims *prima facie* obvious.” MPEP § 2143.01 (VI).

Third, applicant respectfully submits that Care Entrée, Lipton and Goch do not disclose teach or suggest providing providing the discount price list to the members via the global telecommunications network as recited in claims 26-28.

Fourth, applicant respectfully submits that Care Entrée, Lipton and Goch do not disclose teach or suggest providing a medical service/good provider listing for the medical service/good providers based on the obtained information, wherein the medical service/good provider listing is accessible by the members via a global telecommunications network, comprises basic listings and premium listings for the medical service/good providers, and is searchable by the members using one or more search criteria comprising a geographic area or a service/good provided by the medical service/good providers and providing a discount price list to the members via the global telecommunications network, wherein the discount price list comprises published rates for the services/goods provided by the medical service/good providers for two or more geographic areas and each member can only access the published rates for the geographic area associated with the member as recited in claims 26-28. In addition, applicant respectfully submits that it would not be obvious to combine the non-Internet based systems of Care Entrée, Lipton and Goch with Ferguson’s “software development tool”. For all these reasons, applicant respectfully submits that the cited references do not disclose, teach or suggest all the elements recited in claims 26-28, as amended. Accordingly, claims 26-28 are not obvious over the cited references and are, therefore, allowable under 35 U.S.C. § 103(a). Accordingly, applicant respectfully requests that the rejection of claims 26-28 be withdrawn.

Claims 2-9, 12-16 and 21-25

Applicant respectfully submits that claims 2-9, 12-16 and 21-25 depend from claim 26, as amended, which is allowable for the reasons stated above, and further distinguish over the cited references. Claims 2-9, 12-16 and 21-25 are, therefore, allowable under 35 U.S.C. § 103(a). Accordingly, applicant respectfully requests that any rejection of claims 2-9, 12-16 and 21-25 be withdrawn.

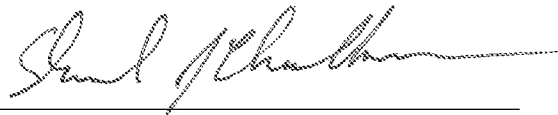
Conclusion

For the reasons set forth above, applicant respectfully requests reconsideration by the examiner and withdrawal of the rejections. Applicant submits that 2-9, 12-16 and 21-28, as amended, are fully patentable. Applicant respectfully requests that a timely Notice of Allowance be issued in this case. If the examiner has any questions or comments, or if further clarification is required, it is requested that the examiner contact the undersigned at the telephone number listed below.

Date: October 29, 2008

Respectfully submitted,

CHALKER FLORES, LLP

By 

Daniel J. Chalker

Reg. No. 40,552

Tel.: (214) 866-0001

Fax: (214) 866-0010

2711 LBJ Frwy

Suite 1036

Dallas, Texas 75234